



APPROVED  
for  
ACCOUNT CHARGE  
04-1700

Express Mail No.: EV318424082  
Date Deposited: 09/03/2003

Approved for use through 10/31/2002. OMB 0651-0032  
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b>	Application or Docket Number <b>09/865,948</b>
--	---

CLAIMS AS FILED - PART I		(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY		
FOR	NUMBER FILED	NUMBER EXTRA			RATE	FEE	RATE	FEE	
BASIC FEE (37 CFR 1.16(a))						\$ 0		\$ 0	
TOTAL CLAIMS (37 CFR 1.16(c))	48	minus 20 =	*	0	x \$ 9 =	0	OR	x \$ 18 =	0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	8	minus 3 =	*	0	x 42 =	0	OR	x 84 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				0	+ 140 =	0	OR	+ 280 =	0
					TOTAL	0	OR	TOTAL	0

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II		(Column 1)	(Column 2)	(Column 3)	(Column 4)	(Column 5)	(Column 6)	(Column 7)	(Column 8)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE	
Total (37 CFR 1.16(c))	* 28	Minus	** 28	=	0	x \$ 9 =	0	OR	x \$ 18 =	0
Independent (37 CFR 1.16(b))	* 8	Minus	*** 8	=	0	x 42 =	0	OR	x 84 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0	
					TOTAL	0	OR	TOTAL	0	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE	
Total (37 CFR 1.16(c))	*	Minus	**	=	0	x \$ 9 =	0	OR	x \$ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	0	x 42 =	0	OR	x 84 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0	
					TOTAL	0	OR	TOTAL	0	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE	
Total (37 CFR 1.16(c))	*	Minus	**	=	0	x \$ 9 =	0	OR	x \$ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	=	0	x 42 =	0	OR	x 84 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 140 =	0	OR	+ 280 =	0	
					TOTAL	0	OR	TOTAL	0	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SEND TO: Mail Stop Fee Amendment  
 Commissioner For Patents, PO Box 1450  
 Alexandria, VA 22313-1450